STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
NAME OF COMMITTEE (in the community of the community	(Check if name is changed)	Example: If typying, ty over the lines	pe 12FE4M5	
NATSO Inc. N	ATSO PAC			
ADDRESS (number and s	1737 King St., Suit	e 200		
(Check if address is changed)	Alexandria		L L <mark>VA</mark>	22314
		CITY▲	STATE	ZIP CODE ▲
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one kroberts@natso.cc	•		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0 3	7 24 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00097865		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED	(A)	
I certify that I have examine Type or Print Name of	ned this Statement and to the best of my k		orrect and complete	
Signature of Treasurer	Electronically Filed by Lisa J. N	l ullings	Date 03	24 / 2009
NOTE: Submission of fal	se, erroneous, or incomplete information n	nay subject the person signing that		
Office Use Only		For further information Federal Election (Toll Free 800-424	Commission I-9530	FEC FORM 1 (Revised 02/2009)